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CLAIMS	ONLY		Application Number	3/0 Filing Date	
				onal daims or amendments	
CLAIMS ASSINED— CO-13—OC Indep Depend	AFTER FIRST AMENDMENT Indep Depend	AFTER SECOND AMENDMENT Indep Depend	6-13-	Ole Depend Indep Depend	Indep Depend
3 4			51 52 53 54		macp Depend
5 6 7 8			55 56 57		
9 7			58 59 60 61	/	
12 / 13 / 14 / 15 /			62 63 64		
16 17 18 19			65 66 67 68	1	
20 /			69 70 71 72		
23 24 25 26			73 74 75 76		
27 28 29 30			77 78 79 80		
31 32 33 34			81 82 83		
35 36 37 38			84 85 86 87		
39 / 40 / 41			88 89 90 91		
42 / 43 / 44 / 45 /			92 93 94 95		
46 47 48 49			96 97 98		
Total Indep			99 100 Total Indep		
Depend Total Claims			Total Depend Total Claims	4	4
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